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TAYLOR &
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Fax Number: 703-872-9306 Telephone No.: _____
From: Kenneth J. Cool
Date: April 26, 2004 Time: _____
Operator: Krista Mathieson Matter: 42390.P13377
Number of pages including cover sheet: 11
In Re Patent Application of: "Optical Probe for Wafer Testing"
Application No.: 10/040,398
Filed: December 28, 2001
For: Kjetil Johannessen
Enclosed are the following documents: Attached are the following: a
Transmittal form, the Fee Transmittal Form (In duplicate) and the Amendment
Response.

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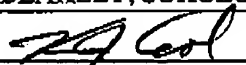
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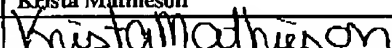
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/040,398
		Filing Date	December 28, 2001
		First Named Inventor	Kjetil Johannessen
		Art Unit	2877
		Examiner Name	Mooney, Michael P.
Total Number of Pages in This Submission	10	Attorney Docket Number	42390P13377

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Certificate of Transmission via Facsimile. </div>
Remarks		


SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kenneth J. Cool, Reg. No. 40,570 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	April 26, 2004

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Signature		Date April 26, 2004

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 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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<i>Effective 10/01/2004. Patent fees are subject to annual revision.</i>				Application Number	10/040,398
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.				Filing Date	December 28, 2001
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0.00				Examiner Name	Mooney, Michael P.
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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																		
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SUBMITTED BY				<i>Complete (if applicable)</i>	
Name (Print/Type)	Kenneth J. Cool	Registration No. (Attorney/Agent)	40,570	Telephone	(408) 850-1229
Signature				Date	4/26/04

Based on PTO/SB/17 (10-03) as modified by Blakey, Boldkoff, Taylor & Zalman (vtr) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																		
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account <div style="margin-top: 10px;"> Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation </div> <p>The Commissioner is authorized to: (check all that apply)</p> <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.18, 1.17, 1.18 and 1.20. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	3. 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Based on PTO/SF/17 (10-03) as modified by Blakely, Solokoff, Taylor & Zeffman (WV) 02/10/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Docket No.: 42P13377

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 10/040,398 Confirmation No. 2067
Inventor : Kjetil Johannessen
Assignee : Intel Corporation
Filed : December 28, 2001
Art Unit : 2877
Examiner : Mooney, Michael P.
Title : Optical Probe for Wafer Testing

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APR 26 2004

OFFICIAL

OFFICE ACTION RESPONSE

MS Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed March 29, 2004, reconsideration and further examination of the application is hereby requested. Kindly consider the following:

CERTIFICATE OF TRANSMISSION

I hereby certify that I am causing the above-referenced correspondence to be facsimile transmitted to the US Patent and Trademark Office on the date shown below:

April 26, 2004

Date of Transmission

Krista Mathieson

Name of Person Faxing Correspondence

Krista Mathieson
Signature

April 26, 2004
Date

Docket No.: 42P13377
Appl. No.: 10/040,398

1

Docket No.: 42P13377

INTRODUCTORY COMMENTS

Request for an Extension of Time

This Office Action Response is submitted in response to the Office Action dated March 29, 2004 for which the shortened statutory period for response was set to expire on April 29, 2004. It is believed that no additional extension of time fee is required. In the event any extension of time fee is required, or any other fee related to this Response is required, please consider this a request therefore. Authorization is hereby given to charge Deposit Account No. 50-0221 for such fee or fees.

Authorization to Charge Deposit Account

Authorization is hereby given to charge Deposit Account No. 50-0221 for any fee or fees related to this Office Action Response.

Docket No.: 42P13377
Appl. No.: 10/040,398

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